

* Corresponding author:

E-mail address: cherylas@ualberta.ca (C.A. Sadowski).

Background: The Canadian Medication Appropriateness and Deprescribing Network (CADEn) has been working to enhance the safety and appropriateness of medication use by educating the public, healthcare professionals, and decision-makers. Recognizing the urgency of addressing health disparities in Indigenous communities, in 2023 CADEn prioritized its commitment to Indigenous partnerships and organizational change by acknowledging its shortcomings in this domain.

Methods: A dedicated working group was established to craft a comprehensive report addressing the network's historical context, identifying gaps specifically in Indigenous community engagement, articulating goals and vision, and outlining a 5-year action plan. Emphasizing humility, learning, and relationship building, the plan seeks to foster a culturally safe approach to partnering with Indigenous communities in research and actions that reflect their priorities around medication appropriateness, and give power to Indigenous ways of knowing and doing.

Results: Challenges in the process include determining focal points for outreach among the diverse Indigenous communities, and balancing the need to develop a pan-Indigenous approach while still honoring unique Indigenous community needs and priorities related to medication appropriateness. A meeting grant was prepared to bring together representatives from multiple First Nation communities to discuss medication appropriateness and harm in light of historical wrongs and current policies that often lead to discrimination. Overcoming these challenges, a body of Indigenous-owned testimonials will be compiled through active listening and engagement, shedding light on appropriate medication use in Indigenous communities.

Conclusions: A relational approach to decolonization and Indigenization is necessary to address long-standing inequities in health of First Nation communities in Canada.

<https://doi.org/10.1016/j.sapharm.2025.03.026>

Abstract 106

Exploring volunteer pharmacists' experiences in responding to 2023 Türkiye earthquakes: A qualitative phenomenological study

Mehmet Barlas Uzun¹, Gizem Gülpınar^{2,*}, Ayesha Iqbal³

¹ Department of Pharmacy Management, Faculty of Gülhane Pharmacy, Sağlık Bilimleri University, 06018, Ankara, Türkiye; ² Department of Pharmacy Management, Faculty of Pharmacy, Gazi University, 06330, Ankara, Türkiye;

³ Office of Lifelong Learning and the Physician Learning Program, Faculty of Medicine and Dentistry, University of Alberta, AB T6G1C9 Edmonton, Canada

* Corresponding author:

E-mail address: gizemgulpinar@gazi.edu.tr (G. Gülpınar).

Background: Pharmacists are vital in disaster response efforts, dispensing essential medications, managing pharmacy services, consulting, and educating survivors regarding their medications. Their contributions, however, are often underrepresented in scientific literature. This study aimed to explore the experiences of pharmacists who provided volunteer services to meet the pharmaceutical needs of the survivors after two major earthquakes in Türkiye in 2023.

Methods: This study adopted a phenomenological approach. Data were collected using semi-structured interviews. Purposive sampling was used to invite volunteer pharmacists provided pharmaceutical care services to survivors. Interview transcripts were analyzed following an inductive, reflexive thematic analysis.

Results: In total, 15 pharmacists were interviewed. Four main overarching themes "response to the earthquake", "preparedness for the earthquake", "experiences during service delivery" and "mental and physical experiences" were developed.

Conclusions: From participants' experiences, it is essential to expand the clinical responsibilities of pharmacists and train them in providing wound care, administering immunization, and prescribing. Pharmacists should be integrated as essential members of disaster health teams. International health organizations, non-governmental organizations, and governments are encouraged to work collaboratively and develop disaster management plans including pharmacists in early responders. This might help mitigate the deficiencies and overcome challenges in healthcare systems to provide effective patient-centered care by health

professionals and respond effectively to disasters.

<https://doi.org/10.1016/j.sapharm.2025.03.024>

Abstract 119

Antipsychotic Prescribing in Ireland: knowledge, attitudes and beliefs of healthcare professionals.

Donagh Mc Mahon¹, Laura J. Sahn^{1,2,*}

¹ Pharmaceutical Care Research Group, School of Pharmacy, University College Cork, Ireland; ² Department of Pharmacy, Mercy University Hospital, Grenville Place, Cork, Ireland

* Corresponding author:

E-mail address: lsahn@ucc.ie (L.J. Sahn).

Background: Antipsychotic medications are clinically effective in managing and treating chronic mental health conditions including psychosis. The side effects of antipsychotics, and specifically, antipsychotic induced weight gain (AIWG) can pose challenges for clinicians and patients and lead to non-adherence and potentially poorer outcomes. Our objective was to investigate the knowledge, attitudes, and beliefs of Healthcare professionals (HCPs) on antipsychotic prescribing in Ireland.

Methods: Participants who have worked/ currently work as a healthcare professional (nurse, doctor, pharmacist) and have had experiences of working with patients being treated with antipsychotic medication were included. Semi-structured interviews were conducted with HCPs using Microsoft Teams from November to December 2023 and were analysed using thematic analysis. Ethical approval to conduct this study was granted by the Social Research Ethics Committee (SREC) at University College Cork (UCC).

Results: Five HCPs (three psychiatrists, two nurses) with an average of 13.6 years experience (range 3-25 years) and a mixture of urban, rural, acute and community settings participated. Two major themes; adherence and decision-making emerged. Sub themes included health literacy, role of gender, and the multidisciplinary team. HCPs described their knowledge of the medication as it related to its effectiveness and seeing the success in ameliorating the positive symptoms of psychosis and contrasted this to the physical health risks, including but not limited to AIWG. HCPs reported on the advantages of a holistic approach to antipsychotic prescribing and valued the input of the multidisciplinary team members.

Conclusions: Antipsychotic prescribing in Ireland is largely initiated by Consultant psychiatrists however the follow up management for many patients is the community setting. Multidisciplinary teams including endocrinologists, pharmacists, in addition to social care professionals, working together for an optimal outcome for the patients mental and physical health would likely lead to more tailored and patient-centered management and care.

<https://doi.org/10.1016/j.sapharm.2025.03.025>

Abstract 130

Exploring Vaccine Hesitancy and Role of Pharmacists as Vaccine Advocates in Rural Wyoming

Nervana Elkhadragey¹, Reshmi Singh^{1,*}, Michelle Blakely¹

¹ Division of Pharmaceutical Sciences, School of Pharmacy, University of Wyoming, Laramie, WY 82070

* Corresponding author:

E-mail address: rsingh5@uwyo.edu (R. Singh).

Background: Vaccine hesitancy poses a significant challenge to public health, especially in rural areas where misinformation and limited access to healthcare exacerbate the issue. Addressing the multifaceted nature of vaccine hesitancy requires a comprehensive understanding of the underlying beliefs and attitudes that influence health behaviors. This study sought to explore the sociocultural and behavioral factors that contribute to vaccine hesitancy in rural populations, using the Health Belief Model (HBM) as a theoretical framework. This study will serve as a framework for devising an evidence-based, tailored Motivational Interviewing (MI) training program for pharmacists to help increase vaccine confidence in rural populations.

Methods: Employing the HBM as a guiding framework, five focus groups were conducted involving rural community members. The HBM components—perceived susceptibility, severity, benefits, barriers, cues to action, and self-efficacy—helped structure discussions and analyze data, providing insights into the community's health beliefs and attitudes towards vaccination. Trustworthiness and rigor were ensured by having each author analyze and cross check themes identified and consensus obtained amongst the three coauthors.

Results: The study revealed a deep-seated mistrust in both governmental health authorities and pharmaceutical entities, contrasted with a strong trust in local healthcare providers, notably pharmacists. Identified barriers to vaccine uptake included concerns about the safety and efficacy of vaccines, skepticism towards the accelerated development of new vaccines, and a call for more accessible and localized vaccine information. Participants expressed a need for interventions to address these concerns directly.

Conclusions: Key factors influencing vaccine hesitancy in rural areas were elucidated, highlighting the critical role of health professionals in mitigating these concerns. By focusing on reducing perceived barriers and enhancing perceived benefits and self-efficacy, pharmacist-led interventions can significantly improve vaccine confidence and uptake. Future efforts will focus on exploring community pharmacist perspectives and creating a tailored MI training for pharmacists, based on our findings.

<https://doi.org/10.1016/j.sapharm.2025.03.026>

Abstract 138

Examining Community Pharmacists' Perceptions of their Professional Quality of Life: Taking Care of the Pharmacist

Marcia M. Worley^{1,*}, Nidhi Kanchan¹

¹ College of Pharmacy, The Ohio State University, Columbus, Ohio, USA

* Corresponding author:

E-mail address: worley.18@osu.edu (M.M. Worley).

Background: During the COVID-19 pandemic, community pharmacists faced increased workload and demands from patients and the healthcare system that continues to this day. Understanding professional (work-related) quality of life (QOL) can inform evidence-based strategies to improve pharmacist well-being, decrease burnout, and improve workplace retention. Additionally, for pharmacists to engage in caring patient relationships and optimize medication use, it is important to examine their professional QOL. The primary objective was to examine community pharmacists' perceptions of their professional QOL. The secondary objective was to assess associations between professional QOL and pharmacists' practice-related characteristics, as well as pharmacists' perceptions of the impact of professional QOL on patient relationships.

Methods: A cross-sectional, descriptive survey design was used. A Qualtrics panel of community pharmacists representative of the United States pharmacist population in terms of age, gender, and ethnicity, was used to gather study data (N=200). Pharmacists' perceptions of their professional QOL were measured using the validated 30-item Professional Quality of Life (ProQOL) instrument (version 5). ProQOL measures professional QOL that is impacted by perceived support, compassion satisfaction, and compassion fatigue. Compassion fatigue dimensions include burnout, secondary traumatic stress, and moral distress. Data were collected on practice-related characteristics and respondent demographics. Open-ended survey questions allowed pharmacists to provide comments about their professional QOL and impact on patient relationships. Primary objective data will be analyzed using the ProQOL manual. Secondary objective data will be analyzed using quantitative analyses (alpha set at 0.05 a priori) and open-ended response data will be analyzed using content analysis. Descriptive statistics will be used to describe the study sample.

Results: Data collection is complete.

Conclusions: Study results will inform future research to develop and evaluate an intervention to improve community pharmacist professional QOL. Future research to study the impact of professional QOL on pharmacist-patient relationships and the patient medication use process is planned.

<https://doi.org/10.1016/j.sapharm.2025.03.027>

Abstract 140

Exploring community pharmacists' and patients' experiences regarding a community pharmacist-delivered depression screening and referral service for older adults

Duha N. Gide^{1,*}, Sarira El-Den¹, Natasa Gisev², Kevin Ou³, Lisa Kouladjian O'Donnell⁴, Claire L. O'Reilly¹

¹ School of Pharmacy, Faculty of Medicine and Health, The University of Sydney, Sydney, New South Wales, Australia; ² National Drug and Alcohol Research Centre, UNSW Sydney, Sydney, New South Wales, Australia; ³ Pharmaceutical Society of Australia, Sydney, New South Wales, Australia; ⁴ Laboratory of Ageing and Pharmacology, Kolling Institute, Faculty of Medicine and Health, The University of Sydney and the Northern Sydney Local Health District, Sydney, New South Wales, Australia

* Corresponding author:

E-mail address: duha.gide@sydney.edu.au (D.N. Gide).

Background: Approximately 10-15% of older adults (≥65 years) experience late-life depression (LLD). Community pharmacists are well-positioned to identify patients at risk of LLD, thereby supporting the timely detection and treatment of LLD. The aim of this study is to explore community pharmacists' and patients' experiences delivering and receiving a depression screening and referral service for older adults, respectively.

Methods: Community pharmacists and patients who participated in a pilot study in New South Wales, Australia, from 2021-2023, focussing on screening and referring older adults at risk of depression, were invited to participate in semi-structured interviews following completion of pilot study data collection. An interview guide was developed to explore pharmacists' and patients' experiences delivering and receiving the screening service, respectively. Semi-structured interviews explored barriers and facilitators and assessed pharmacists' and patients' comfort and acceptability regarding the service. Thematic inductive analysis was used to identify themes and subthemes.

Results: A total of six pharmacists and five patients completed telephone interviews. Most pharmacists were female (n=4) and practising in a metropolitan area (n=4), whereas all patients were female (n=5). Three themes were identified: 'Appropriateness of the community pharmacy setting', 'Training before screening is valuable' and 'Patients' hesitation to undergo screening', which were divided into six subthemes. Pharmacists and patients were accepting of the screening service, with pharmacist-patient rapport, frequent interactions between patients and pharmacists, and training acting as facilitators. Barriers included patients' preference to discuss mental health concerns with doctors compared to pharmacists and mental health stigma.

Conclusions: Pharmacists and patients viewed pharmacist-delivered LLD screening to be an acceptable and useful service, reporting that positive patient-pharmacist relationships improved comfort with screening. The findings of this study may be used to inform potential service delivery models to support the early identification and treatment of LLD.

<https://doi.org/10.1016/j.sapharm.2025.03.028>

Abstract 159

Factors Impacting Job Satisfaction among Pharmacists in the Arab World: A Qualitative Study

Ali Azeez Al-Jumaili^{1,*}, Rehab Elhiny², Dixon Thomas³, Fawzy Elbarbry⁴, Maher Khmour⁵, Fatima Sherbeny⁶, Anas Hamad⁷

¹ University of Baghdad College of Pharmacy, Baghdad, Iraq; ² Faculty of Pharmacy, Minia University, Minia, Egypt; ³ College of Pharmacy, Gulf Medical University, Ajman, UAE; ⁴ School of Pharmacy, Pacific University, Hillsboro, OR, USA; ⁵ College of Pharmacy, Al-Quds University, Abu Dis, Palestine; ⁶ College of Pharmacy and Pharmaceutical Sciences, Institute of Public Health, Florida A&M University, Tallahassee, FL, USA; ⁷ Hamad Medical Corporation, Doha, Qatar

* Corresponding author:

E-mail address: ali.baraak@copharm.uobaghdad.edu.iq (A.A. Al-Jumaili).